

Hasn't used SBY as only been working with families with infants over 1 yr and toddler age.

Finds that parents seem to accept sleepless nights in younger children and it's when infants reach over 1yr is when they seem to be seeking help with sleep. Would like to see SBY developed to include older children.

In her area she works with a lot of teen mums "if it was less wordy it would be more beneficial to them, it's more the middle class mums who would really take this on board. With the lots of mums I work with it would be too much for them, too complicated, but the general ideas, you know building up sleep pressure, things like that, is good, it's just getting those ideas across to those mums in a different way other than the actual leaflet itself ". She has been using the ideas (building up sleep pressure, getting out and about, tire them out, getting away from set naps in the house, trying to get them to look at their nighttime sleep) when talking to mums and in group work. There are a lot of mums who don't really go out the house other than to do a bit of shopping so has been trying to encourage mums to get out and about more with their babies. Even though she talks the ideas through with the mums she feel that leaving the leaflet with them would be just too complicated for them.

Also uses the Solihull approach of the disappearing chair.

Found the SBY training very beneficial and is using the principle in practice with parents with younger and older children. Was using some of the principles before the training such as telling parents to avoid long daytime naps, particularly late afternoon but has altered this advice and is now saying to parents its ok for them to have a nap at that time if it's a nap on the go as they will just take what sleep they need. Learning about that has been really important.

The parents seem to be receptive to the SBY ideas and she has noticed some improvement in sleep issues with some of the parents she works with but obviously having not used SBY in the formal way it difficult to judge its impact. There has been no resistance from parent about any of the ideas that have been suggested.

The most relevant aspect of SBY for the mums she works with is suggestions about reducing daytime sleeps as parents often have that set routine of daytime naptimes at a particular time where they put them down to sleep in their cots in a darkened room, just like a night time sleep. Parents sometime think that they need to do that in order for their babies to get a decent sleep so has been trying to inform them about allowing babies to nap on the go just to take the edge off the sleep pressure. Feels that parents have been receptive to this ideas as "when parents are getting to the point where they are asking for help with sleep they are happy to try anything". You have to kind of "sell it" to them in a way that they might not be getting that set amount of time when they nap in the day but it's a trade-off to achieve a better nighttime sleep.

Having conversations with parent about sleep reassures them that sleep issues are not something that will go on forever.

Feels the SBY fill a gap in the service provision as there isn't anything else other than Solihull (disappearing chair) that they use with parents and Solihull is for use with parents over 6 months. Feels that Solihull addresses children's anxieties about having the parent present but doesn't address the topics covered by SBY; sleep cycles, daytime naps.

Would like to see the SBY programme develop in a way that it can be delivered without the use of leaflets and more accessible to a wider range of mums. There service is also trying to move away from leaflet based provisions. Leaflets are well used by middle class parents but in more deprived areas they are not used by parents. Need a different technique to be able to deliver the SBY principles or to have a leaflet that is less wordy for those parents. "I think they just look at it and go, gosh, that just far too much for me to look at...all the stuff about sleep cycles and circadian rhythms it just far too complicated for them". "You want to get all that information from the leaflet across and there will be parents who want in more affluent areas but it's really only the middle class mums who do all lot more reading".

[I suggested a checklist of ideas or a very simple leaflet that could be left with parents if the full leaflet was inappropriate] Agreed that this might be a good idea or suggested an interactive activity/sleep diary that parents could keep to keep track of the activities that baby has been doing each day and this might be useful to compare the daytime behaviours with the amount of sleep baby might be getting at night. Thought this may be a good way for parents to visualise and make connections with nighttime sleep and some of the changes they make "this might hit home with them more...help them to see patterns that they may not have really noticed at all". This is a technique that they have used with feeding in the past and is something that the HP can sit with parent and help them to complete as well as a record they could keep themselves.

In terms of time with parents, delivering SBY whether it be with or without the leaflet is not an issue. Even if it's a shorter appointment in clinic we arrange for a follow-up appointment or a home visit. If someone asks about a sleep issue it very useful to have the training to help parents, it doesn't necessarily need to include the leaflet to go with it "some parents just won't understand it and won't read it".

Didn't think evidence from a RCT would be particularly necessary "as its not necessarily a treatment as such and if implemented it's not going to introduce harm" evidence from evaluations would be sufficient.